

AUG 22 2001

## 510(k) Summary

### 510(k) Submission Information:

Device Manufacturer: Dade MicroScan Inc.  
Contact name: Cynthia Van Duker, Sr. Regulatory Affairs Specialist  
Fax: 916-374-3144  
Date prepared: February 8, 2001  
Product Name: Microdilution Minimum Inhibitory Concentration (MIC) Panels  
Trade Name: MicroScan® Dried Gram-Negative and Gram-Positive MIC/Combo Panels  
Intended Use: To determine antimicrobial agent susceptibility  
510(k) Notification: New antimicrobial - Moxifloxacin  
Predicate device: MicroScan Dried Gram Negative and Gram Positive MIC/Combo Panels

### 510(k) Summary:

MicroScan® Dried Gram-Negative and Gram-Positive MIC/Combo Panels are designed for use in determining quantitative and/or qualitative antimicrobial agent susceptibility of colonies grown on solid media of rapidly growing aerobic and facultative Gram-Negative and Gram-Positive cocci.

The antimicrobial susceptibility tests are miniaturizations of the broth dilution susceptibility test that have been diluted in broth and dehydrated. Various antimicrobial agents are diluted in broth to concentrations bridging the range of clinical interest. Panels are rehydrated with water, after inoculation with a standardized suspension of the organism. After incubation in a non-CO<sub>2</sub> incubator for 16-20 hours, the minimum inhibitory concentration (MIC) for the test organism is read by determining the lowest antimicrobial concentration showing inhibition of growth.

The proposed MicroScan® Dried Gram-Negative and Gram-Positive MIC/Combo Panel demonstrated substantially equivalent performance when compared with an NCCLS frozen Reference Panel, as defined in the FDA DRAFT document "Guidance on Review Criteria for Assessment of Antimicrobial Susceptibility Devices", dated March 8, 2000. The Premarket Notification (510[k]) presents data in support of the MicroScan® Dried Gram-Negative and Gram-Positive MIC/Combo Panel with Moxifloxacin.

The external evaluation was conducted with fresh and stock Efficacy isolates and stock Challenge strains. The external evaluations were designed to confirm the acceptability of the proposed Dried Gram-Negative and Gram-Positive Panel by comparing its performance with an NCCLS frozen Reference panel. Challenge strains were compared to Expected Results determined prior to the evaluation. The Dried Gram-Negative and Gram-Positive Panel demonstrated acceptable performance with an overall Essential Agreement of >98% for Moxifloxacin when compared with the frozen Reference panel.

Inoculum and instrument reproducibility testing demonstrated acceptable reproducibility and precision with Moxifloxacin, regardless of which inoculum method (i.e., Turbidity and Prompt), or instrument (autoSCAN-4® and WalkAway®) was used.

Quality Control testing demonstrated acceptable results for Moxifloxacin.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

AUG 22 2001

Food and Drug Administration  
2098 Gaither Road  
Rockville MD 20850

Ms. Cynthia Van Duker  
Senior Associate, Regulatory Affairs  
Dade MicroScan Inc.  
1584 Enterprise Boulevard  
West Sacramento, CA 95691

Re: 510(k) Number: K010418  
Trade/Device Name: MicroScan® Dried Gram-Negative and Gram-Positive  
MIC/Combo Panels with Moxifloxacin (0.004 - 16mcg/ml)  
Regulation Number: 866.1640  
Regulatory Class: II  
Product Code: LTT  
Dated: June 14, 2001  
Received: June 18, 2001

Dear Ms. Van Duker:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent to devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

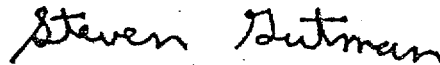
If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the Good Manufacturing Practice for Medical Devices: General (GMP) regulation (21 CFR Part 820) and that, through periodic GMP inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

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This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4588. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "<http://www.fda.gov/cdrh/dsma/dsmamain.html>".

Sincerely yours,

A handwritten signature in black ink that reads "Steven Gutman". The signature is written in a cursive, slightly slanted style.

Steven I. Gutman, M.D., M.B.A.  
Director  
Division of Clinical Laboratory Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure

## INDICATIONS FOR USE STATEMENT

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510(k) Number (if known): K010418

Device Name: MicroScan® Dried Gram-Negative and Gram-Positive MIC/Combo Panels with Moxifloxacin (0.004 - 16 mcg/ml)

### Indications For Use:

The MicroScan® Dried Gram-Negative and Gram-Positive MIC/Combo Panel is used to determine quantitative and/or qualitative antimicrobial agent susceptibility of colonies grown on solid media of rapidly growing aerobic and facultative Gram-Negative and Gram-Positive cocci. After inoculation, panels are incubated for 16 – 20 hours at 35°C +/- 1°C in a non-CO2 incubator, and read either visually or with MicroScan instrumentation, according to the Package Insert.

This particular submission is for the addition of the antimicrobial Moxifloxacin at concentrations of 0.004 to 16 mcg/ml to the test panel.

The Gram-Negative organisms which may be used for Moxifloxacin susceptibility testing in this panel are:

*Citrobacter freundii*  
*Enterobacter cloacae*  
*Escherichia coli*  
*Klebsiella oxytoca*  
*Klebsiella pneumoniae*  
*Proteus mirabilis*

The Gram-Positive organisms which may be used for Moxifloxacin susceptibility testing in this panel are:

*Staphylococcus aureus* (methicillin susceptible strains only)  
*Streptococcus pyogenes*

The MicroScan® Dried Gram-Negative and Gram-Positive MIC/Combo Panels with Moxifloxacin are not intended for use with *Streptococcus pneumoniae* and viridans streptococci.

(PLEASE DO NOT WRITE BELOW THIS LINE - CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)  
L. L. L. L. L.  
(Division Sign-Off)  
Division of Clinical Laboratory Devices

510(k) Number K010418

Prescription Use ☒  
(Per 21 CFR 801.109)

OR

Over-The-Counter Use ☐

(Optional Format 1-2-96)